



PROME-IMSR-AFD-15

FUNDS REQUISITION FORM**Requisition submission Date:** _____**Vote/Project:** _____
_____**Amount Requisitioned:** (in figures)(in words).....
.....**Purpose** (Append breakdown) and attach memo if necessary:

Item (Description)	Budget (UGX)	Expenditure to Date (UGX)	Amount Requisitioned (UGX)

Any additional information:
.....**Requisitioned by** (Signature): _____

Name: _____

Approvals



Project Officer / Vote Controller	Signature
Managing Director	Signature